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Complete if Known Substitute for form 1449/PTO Application Number 10/808 148 Filing Date INFORMATION DISCLOSURE First Named Inventor Shahram Abdollahi-Al STATEMENT BY APPLICANT Art Unit 2819 (Use as many sheets as necessary) **Examiner Name** Sheet 1 **Attorney Docket Number** TR002-C-1 of 1

				DOCUMENTS	
Examiner Initials*	Cite No. ¹	Document Number Number-Kind Code ^{2 (f known)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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